

SERFF Tracking Number:	ANTX-127036842	State:	Arkansas
Filing Company:	American National Life Insurance Company of Texas	State Tracking Number:	47999
Company Tracking Number:			
TOI:	MS06 Medicare Supplement - Other	Sub-TOI:	MS06.000 Medicare Supplement - Other
Product Name:	Medicare Supplement Multiple Policy Annual Report		
Project Name/Number:	/		

Filing at a Glance

Company: American National Life Insurance Company of Texas
Product Name: Medicare Supplement Multiple Policy Annual Report
SERFF Tr Num: ANTX-127036842 State: Arkansas
TOI: MS06 Medicare Supplement - Other
SERFF Status: Closed-Accepted For Informational Purposes
State Tr Num: 47999
Sub-TOI: MS06.000 Medicare Supplement - Other
Co Tr Num:
State Status: Filed-Closed
Filing Type: Form
Reviewer(s): Stephanie Fowler
Author: Tommie Geddes
Disposition Date: 02/18/2011
Date Submitted: 02/16/2011
Disposition Status: Accepted For Informational Purposes
Implementation Date Requested: On Approval
Implementation Date:
State Filing Description:

General Information

Project Name:	Status of Filing in Domicile: Pending
Project Number:	Date Approved in Domicile:
Requested Filing Mode:	Domicile Status Comments:
Explanation for Combination/Other:	Market Type: Individual
Submission Type: New Submission	Individual Market Type:
Overall Rate Impact:	Filing Status Changed: 02/18/2011
	State Status Changed: 02/18/2011
Deemer Date:	Created By: Tommie Geddes
Submitted By: Tommie Geddes	Corresponding Filing Tracking Number:
Filing Description:	
Medicare Supplement Multiple Policy Annual Report	

Company and Contact

Filing Contact Information

Tommie Sue Geddes, Compliance Analyst	tommiesue.geddes@anico.com
One Moody Plaza SSH MP, Ste. 200	281-538-4839 [Phone]

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Galveston, TX 77550 409-766-6526 [FAX]

Filing Company Information

American National Life Insurance Company of Texas CoCode: 71773 State of Domicile: Texas
One Moody Plaza, SSH MP, Ste.200 Group Code: -99 Company Type: Health Insurance
Galveston, TX 77550 Group Name: State ID Number:
(281) 538-4842 ext. [Phone] FEIN Number: 75-1016594

Filing Fees

Fee Required? No
Retaliatory? No
Fee Explanation:
Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
American National Life Insurance Company of Texas	\$0.00	02/16/2011	

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Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Accepted For Informational Purposes	Stephanie Fowler	02/18/2011	02/18/2011

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Schedule	Schedule Item	Schedule Item Status	Public Access
Supporting Document	Flesch Certification		Yes
Supporting Document	Application		Yes
Supporting Document	Health - Actuarial Justification		Yes
Supporting Document	Outline of Coverage		Yes
Supporting Document	Medicare Supplement Multiple Policy Annual Report	Accepted for Informational Purposes	Yes

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Supporting Document Schedules

	Item Status:	Status Date:
Bypassed - Item: Flesch Certification Bypass Reason: n/a Comments:		
Bypassed - Item: Application Bypass Reason: n/a Comments:		
Bypassed - Item: Health - Actuarial Justification Bypass Reason: n/a Comments:		
Bypassed - Item: Outline of Coverage Bypass Reason: n/a Comments:		
Satisfied - Item: Medicare Supplement Multiple Policy Annual Report Comments: Attachments: Multiple Policy Letter-ANTEX.pdf	Accepted for Informational Purposes	02/18/2011

SERFF Tracking Number: *ANTX-127036842* *State:* *Arkansas*

Filing Company: *American National Life Insurance Company of* *State Tracking Number:* *47999*
Texas

Company Tracking Number:

TOI: *MS06 Medicare Supplement - Other* *Sub-TOI:* *MS06.000 Medicare Supplement - Other*

Product Name: *Medicare Supplement Multiple Policy Annual Report*

Project Name/Number: /

Multiple Policy Report-ANTEX.pdf



AMERICAN NATIONAL LIFE INSURANCE COMPANY OF TEXAS

CHARLES J. JONES, VICE PRESIDENT, HEALTH ADMINISTRATION
2450 SOUTH SHORE BLVD, SUITE 210 LEAGUE CITY, TX 77573
BUS: (281) 538-4861 FAX: (409) 766-6005 E-mail: charles.jones@anico.com

February 23, 2011

The Honorable Jay Bradford
Arkansas Department of Insurance
1200 West Third Street
Little Rock AR 72201-1904

RE: Medicare Supplement Multiple Policy Report
American National Life Insurance Company of Texas/NAIC #71773

Dear Commissioner:

The reference report is enclosed in accordance with your requirements. Please contact me should you have any questions.

Yours truly,

Charles J. Jones
Vice President, Health Administration

Enclosure

FORM FOR REPORTING MULTIPLE
MEDICARE SUPPLEMENT POLICIES
FOR 2010

COMPANY NAME: American National Life Insurance Company of Texas

ADDRESS: 2450 South Shore Blvd, Suite 210

League City, TX 77573

PHONE NUMBER: 281-538-4861

DUE: MARCH 1 ANNUALLY

THE PURPOSE OF THIS FORM IS TO REPORT THE FOLLOWING
INFORMATION ON EACH RESIDENT OF THIS STATE WHO HAS IN FORCE
MORE THAN ONE MEDICARE SUPPLEMENT POLICY OR CERTIFICATE. THE
INFORMATION IS TO BE GROUPED BY INDIVIDUAL POLICYHOLDER.

POLICY AND CERTIFICATE #	DATE OF ISSUANCE
NONE	



SIGNATURE

Charles J. Jones, Vice President - Health Administration
NAME AND TITLE (PLEASE PRINT)

February 23, 2011
DATE

Charles J. Jones
Vice President, Health Administration